

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION | <i>[Signature]</i> | | 07-14-01 |
| O.I.P.E. CLASSIFIER | | 48 | 7/19/01 |
| FORMALITY REVIEW | <i>Cy</i> | 1122 | 08-24-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | A |
| 2 | ✓ | ✓ | ↑ |
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| 4 | ✓ | ✓ | ↑ |
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| 8 | ✓ | ✓ | ↑ |
| 9 | ✓ | ✓ | ↑ |
| 10 | ✓ | ✓ | ↑ |
| 11 | ✓ | ✓ | ↑ |
| 12 | ✓ | ✓ | A |
| 13 | ✓ | ✓ | ↑ |
| 14 | ✓ | ✓ | A |
| 15 | ✓ | ✓ | A |
| 16 | ✓ | ✓ | A |
| 17 | ✓ | ✓ | ↑ |
| 18 | ✓ | ✓ | ↑ |
| 19 | ✓ | ✓ | ↑ |
| 20 | ✓ | ✓ | ↑ |
| 21 | ✓ | ✓ | ↑ |
| 22 | ✓ | ✓ | A |
| 23 | ✓ | ✓ | ↑ |
| 24 | ✓ | ✓ | ↑ |
| 25 | ✓ | ✓ | ↑ |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

901
08/24/01